# Department of the Treasury Federal Law Enforcement Agencies

### PROCESS RECEIPT AND RETURN

PLAINTIFF UNITED STATES OF AMERICA			COURT CASE NUMBER CR No. 03-10353-WGY						
DEFENDA!	NT N VALDMA	4		TYPE OF PROCESS Preliminary Order of Forfeiture					
SERVE	Name Of Indiv		ny,Corporation,Etc. t	o Serv	e or Description	of Property to Seize			
AT	Address (Street or RFD / Apt. # / City, State, and Zip Code)								
	CE OF SERVICE CO			18° 18° 44.	Number Of Proces Served In This Ca				
UNITED STA John Joseph	JENNIFER H. ZACKS, ASSISTANT U.S. ATTORNEY UNITED STATES ATTORNEY'S OFFICE John Joseph Moakley United States Courthouse				Number Of Partie Served In This Ca				
	se Way, Suite 920 ssachusetts 0221				Check Box If Serv	rice Is On USA			
	STRUCTIONS or OTH and Estimated Avo		ON TO ASSIST IN EXPED	ITING SI	ERVICE (includes Bu	usiness and Alternate Ad	ldresses, Phone		
Please publish the attached Notice of Order of Forfeiture at least once for three (3) successive weeks in the Boston Herald or any other newspaper of general circulation in the District of Massachusetts, in accordance with the attached Preliminary Order of Forfeiture and applicable law.									
_					LJT x328	<u> </u>			
Signature of requesting s	f Attorney or other service on behalf	r Originator of	[ X ]Plaí [ ]Def	aintiff Telephone No.		Date			
	11-			<u> </u>		(617) 748-3100	Feb. 14, 2005		
SIGMATURE	OPPERSON ACC				··		Date		
	SPACE	BELOW FO	R USE OF TREA	SUR	LAW ENFOR	RCEMENT AGENC	Y		
	e receipt for the ocess Indicated.	District of Origin		SIGNATURE OF AUTHORIZED TREASURY AGENCY OFFICER:			Date		
I hereby Cer EXECUTED The Address	rtify and Return Th AS SHOWN IN "R s Shown Above or	nat I [ ] PERSO REMARKS", the r at the Address	DNALLY SERVED, [ ] F Process Described on t s Inserted Below.	IAVE LE	GAL EVIDENCE OF ridual, Company, Co	SERVICE, IN HAVE proporation, Etc., At			
[ ] I HEREE		RETURN THAT	I AM UNABLE TO LOC	ATE TH	E INDIVIDUAL, COI	MPANY, CORPORATION	,		
NAME & TI above:	TLE of Individual S	erved If not sh	own	[ ] A Person of suitable age and discretion then residing in the defendant's usual place of abode.					
ADDRESS: (Complete only if different than shown above.)					Date of Service [ ] AM [ ] PM				
Please see Remarks Signature, Title and Treasury Agency								,	
					Signature, Title and Treasury Agency				
REMARKS: U.S. Customs and Border Protection									
Notice of Order of Forfeiture was published as instructed above in the <u>Boston</u> Herald on Feb. 22, March 01, and March 08, 2005. Copy of Publisher's									
	cate attac		transfer in the second			E) 1 4.511.011.0	_		
			7.0		-				
TD F 90-22.48 (6/96)									

☐ LEAVE AT PLACE OF SERVICE

## **PUBLISHER'S CERTIFICATE**

Commonwealth of Massachusetts ss.
County of Suffolk
On this day of A.D. 20 05  personally appeared before the undersigned, a Notary Public, within and for
the said county. Judita 1. Presutti
of the Boston Herald a newspaper published by
Boston Herald, Inc., in Boston, County of Suffolk, in the Commonwealth of Massachusetts, and who being duly sworn, states on oath that the
CRIMCSe # $03-103-53-WGY$ advertisement was published in said newspaper in its issues of
Jeb 22, Mare 1,8 A.D. 20 05
Jui Cha
Subscribed and sworman before me this 3011
day of <u>marcl</u> A.D. 20 <u>05</u>
Valerce Dlane Notary Public
•



UNITED STATES DISTRICT COURT  NOTICE OF ORDER OF FORFEITURE  Criminal No. 03-10353-WGY  United States of America, District of Massachusetts, August 21, 2004.  Notice is pereby given that a Preliminary Medicar of Porfetture has been entered in the United States Code, Section 853(n) States of Defendant Roman Valuma in the United States Code, Section 853(n) States Code, Section 982.  **SRO,000 in United States Currency:  **One 2003 silver Acus model MDX, Popering Massachusetts, as more full described in the Deed of Horeron Multiple States Code, Section 982.  **2 Largse Place, Apartment 25, Brighton, Massachusetts, as more full described in the Deed of Horeron Massachusetts, as more full described in the Beed of Horeron Massachusetts, as more full described in the States of Maria Hitto of the Word Large Place, Apartment 25, Brighton, Massachusetts, as more full described in the States of Massachusetts, as more full described in the States of Massachusetts, as more full described in the States of Massachusetts of the Assets in accordance with the Jana Publication of notice of the Massachusetts of the Petitioner of Massachusetts of the Petitioner of the Massachusetts of th
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#### **Department of the Treasury**

Federal Law Enforcement Agencies

#### PROCESS RECEIPT AND RETURN

PLAINTIFF UNITED STATES OF AMERICA			COURT CASE NUMBER CR No. 03-10353-WGY						
	DEFENDANT ROMAN VALDMA			TYPE OF PROCESS  Preliminary Order of Forfeiture					
Name Of Individual, Company, Corporation, Etc. to Serve or Description of Property to Seize  Roman Valdma, #24867-038									
Address (Street or RFD / Apt. # / City, State, and Zip Code) Fort Dix FCI, 5756 Hartford & Pointvile Road, Fort Dix, New Jersey 08640							40		
Send NOTIC	E OF SERVICE co	opy to Request	er:	6. 34 6. 34	Number Of Proces Served In This Cas				
JENNIFER H. ZACKS, ASSISTANT U.S. ATTORNEY UNITED STATES ATTORNEY'S OFFICE John Joseph Moakley United States Courthouse				Number Of Parties Served In This Cas					
	e Way, Suite 920 sachusetts 0221				Check Box If Serv	ice Is On USA			
Numbers, ar Please ser	nd Estimated Avo	ilability times.) d Prelimina		:		siness and Alternate A			
					LJT x3283	3			
Signature of requesting s	Attorney or other ervice on behalf	Originator		Plaintiff Telephone No.		Date			
<u>~</u> (	1, H					(617) 748-3100	Feb. 14, 2005		
SIGNATURE	OF PERSON ACC	CEPTING PROC	ESS:	Date					
	SPACE	BELOW FO	R USE OF TRE	ASURY	LAW ENFOR	CEMENT AGEN	CY		
	receipt for the ocess Indicated.	District of Origin No.	District to Serve	SIGNATURE OF AUTHORIZED TREASURY AGENCY OFFICER:					
I hereby Cer EXECUTED . The Address	tify and Return Th AS SHOWN IN "R Shown Above or	nat I [ ] PERS( EMARKS", the at the Addres	ONALLY SERVED, [ Process Described of Inserted Below.	] HAVE LE n the Indiv	GAL EVIDENCE OF dual, Company, Co	SERVICE, IN HAVE rporation, Etc., At			
[ ]   HEREB ETC. NAME		RETURN THAT	I AM UNABLE TO LO	OCATE THE	INDIVIDUAL, COM	IPANY, CORPORATION	N,		
NAME & TIT above:	LE of Individual S	Served If not sh	own	[ ] A Person of suitable age and discretion then residing in the defendant's usual place of abode.					
shown above.)				Date of Service Time of Service [ ] AM Please see Remarks Section			)		
					Signature, Title and Treasury Agency				
REMARKS: U.S. Customs & Border Protection									
7001 2		4300 258	l. Signed as	rece.		ertified mai: t Dix FCI on			

TD F 90-22.48 (6/96)

PS Form 3811, August 2001

SENDER: COMPLETE THIS SECTION •	COMPLETE THIS SECTION ON DELL'
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>Article Addressed to: Cl. W. 3-103/3-W6 Y</li> <li>Roman Valdma #24367-038</li> <li>Fort Dix FCI</li> <li>5756 Hartford &amp; Pointvile</li> </ul>	A. Signature  X
Road Fort Dix, NJ 08640	3. Service Type  ☐ Certified Mail ☐ Express Mail ☐ Registered ☐ Return Receipt for Merchandise
	☐ Insured Mail ☐ C.O.D.  4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number 7001, 2510 0003	+300 2581
Transfer from Set	Return Receipt 102595-01-M-0381
Domestic F	AGIGITY 1.000-F-

U.S. Postal Service **CERTIFIED MAIL RECEIPT** (Domestic Mail Only; No Insurance Coverage Provided) 2581 00E h Postage Certified Fee Postmark Return Receipt Fee (Endorsement Required) E D O O Restricted Delivery Fee (Endorsement Required) 2510 Total Postage & Fees | \$ Sent To Roman Valdma #24867-038 Street, Act. No. Fort Dix FCI or PO Box No. 5756. Hartford & Poi City, State, ZIP-4 Fort Dix, NJ 08640



## Department of the Treasury Federal Law Enforcement Agencies

#### PROCESS RECEIPT AND RETURN

PLAINTIFF UNITED STATES OF AMERICA				COURT CASE NUMBER CR No. 03-10353-WGY					
DEFENDAN ROMA	NT N VALDMA	<b>\</b>		TYPE OF PROCESS  Preliminary Order of Forfeiture					
	Name Of Indiv	idual,Compar	y,Corporation,Etc.	. to Serv	e or Description o	of Property to Seize			
SERVE	Matthew D	Matthew D. Thompson, Esquire							
AT	Address (Street or RFD / Apt. # / City, State, and Zip Code) Butters, Brazilian & Small LLP, One Exeter Plaza, Boston, MA 02116								
Send NOTICE OF SERVICE copy to Requester:  Number Of Process To Be Served In This Case.									
JENNIFER H. ZACKS, ASSISTANT U.S. ATTORNEY UNITED STATES ATTORNEY'S OFFICE John Joseph Moakley United States Courthouse					Number Of Parties Served In This Ca	з То Ве			
	se Way, Suite 920 ssachusetts 0221				Check Box If Serv	ice Is On USA	7		
Numbers, a Please set	nd Estimated Ava	ilability times.) d Preliminar				siness and Alternate Ad amed individual by			
Signature of	f Attorney or other	Originator	( X IP	laintiff		Telephone No.	Date	1	
requesting s	dervice on behalf of	of		efendant	w *	(617) 748-3100	Feb. 14, 2005		
SIGNATURE	OF PERSON ACC	EPTING PROCE	SS:	*			Date		
	SPACE I	BELOW FO	R USE OF TRE	ASURY	LAW ENFOR	CEMENT AGENC	Y		
	e receipt for the ocess Indicated.	District of Origin No.	District to Serve	SIGNATURE OF AUTHORIZED TREASURY AGENCY OFFICER:			Date		
EXECUTED	rtify and Return Th AS SHOWN IN "R s Shown Above or	EMARKS", the	NALLY SERVED, [ ] Process Described or Inserted Below.	HAVE LE	GAL EVIDENCE OF idual, Company, Co	SERVICE, I HAVE proporation, Etc., At			
[ ] I HEREE	BY CERTIFY AND F	RETURN THAT	I AM UNABLE TO LO	CATE TH	E INDIVIDUAL, CON	PANY, CORPORATION,			
NAME & TI above:	TLE of Individual S	erved If not sho	own		A Person of suitable age and discretion then residing in the defendant's usual place of abode.				
ADDRESS:	(Complete only if o	different than		Date of	Service	Time of Service	[ ] AM		
Please see Remarks									
Ste					signature, Title and Treasury Agency ( Locard 3 ) tephen P. Leonard, Forfeitures Officer			3/0	
REMARKS: U.S. Customs and Border Protection									
Preliminary Order served as instructed above, via certified mail number 7001 2510 0003 4300 2598. Signed as received on 02/23/05.									
Copy of	certified	d mail fo	rms attache	<b>d.</b>					
TD F 90-22.48 (6/96)									

☐ LEAVE AT PLACE OF SERVICE

		Service  D MAIL RECEIPT  Only; No Insurance Coverage Provided)
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4 300	Postage Centiled Fee	FEBOstmark Here
0003	Return Receipt Fee (Endorsement Required) Restricted Celivery Fee (Endorsement Required)	10 Here 2015
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ü	Matthew D.	
7001	or PO Box No. Sm	ters <sub>LP</sub> Brazilian & Exeter Plaza
	1 5 Tom 5000, January 20	See Reverse for instructions

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  ■ Print your name and address on the reverse so that we can return the card to you.  ■ Attach this card to the back of the mailpiece, or on the front if space permits. (23√3)  1. Article Addressed to: (11 / 23 - 103√3 / 24 / 24 )  Matthew D. Thompson, Eag.  Butters, Brazilian & Small One Exeter Plaza  Boston, MA 02116	A. Signature  X
	3. Service Type
2. Article Number 7001 2510 0003	4300 2598
PS Form 3811, August 2001 Domestic Ret	urn Receipt 102595-01-M-0381



#### PROCESS RECEIPT AND RETURN

PLAINTIFF UNITED STATES OF AMERICA			COURT CASE NUMBER CR No. 03-10353-WGY					
DEFENDANT ROMAN VALDMA				TYPE OF PROCESS  Preliminary Order of Forfeiture				
	Name Of Indiv	idual,Compar	ny,Corporation,Etc.	to Serv	e or Description	of Property to Seize		
SERVE	John H. Bra	azilian, Esq	uire					
ΑT								
Send NOTIO	CE OF SERVICE co	py to Requeste	er:	,	Number Of Proce Served in This Ca			
UNITED STA John Joseph	I. ZACKS, ASSIST ATES ATTORNEY' h Moakley United S	S OFFICE States Courthou	•		Number Of Partie Served In This Ca			
	se Way, Suite 920 ssachusetts 0221				Check Box If Serv	vice Is On USA	-	
SPECIAL INSTRUCTIONS or OTHER INFORMATION TO ASSIST IN EXPEDITING SERVICE (includes Business and Alternate Addresses, Phone Numbers, and Estimated Availability times.)  Please serve the attached Preliminary Order of Forfeiture upon the above-named individual by certified mail, return receipt requested.  LJT x3283								
Signature or requesting s	f Attorney or other service on behalf of	Originator	[ X ]PI ( )D:	aintiff efendant		Date Feb. 14, 2005		
SIGNATURI	E OF PERSON ACC	EPTING PROCI	ESS:				Date Peb. 14, 2003	
		,		V & L I I I	/ I AW ENEOE	RCEMENT AGENC	\	
	e receipt for the ocess Indicated.	District of Origin No.	District to Serve	SIGNAT	SIGNATURE OF AUTHORIZED TREASURY AGENCY OFFICER:			
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[ ] I HEREE		RETURN THAT	I AM UNABLE TO LO	CATE TH	E INDIVIDUAL, COI	MPANY, CORPORATION,	,	
					A Person of suitable age and discretion then residing in the defendant's usual place of abode.			
ADDRESS: shown above	(Complete only if over.)	different than		Date of	Service	Time of Service	[ ]AM	
P					Please see Remarks			
1 1 2					re, Title and Treasu	//	Cercar 3/	3665
REMARKS: Stephen P. Leonard, Forfeitures Officer U.S. Customs and Border Protection								
Preliminary Order served as instructed above, via certified mail number 7001 2510 0003 4300 2505. Signed as received on 2/23/05. Copy of certified mail forms attached.								

TD F 90-22.48 (6/96)



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  ■ Print your name and address on the reverse so that we can return the card to you.  ■ Attach this card to the back of the mailpiece, or on the front if space permits.  1. Article Addressed to **PV** O3 - 1035366 Y**  John H, Brazilian, Esg.  Butters, Brazilian &  Small LLP  One Exeter Plaza	A. Signature  Agent  Addressee  B. Received by (Printed Name)  D. is delively address different from item 1?  Yes  If YES, enter delivery address below:
2. Article Number 2001 2510 0003 43	3. Service Type  CX Certified Mail
(Transfer from sei 7001 2510 0003 43	00 2505
PS Form 3811, August 2001 Domestic Ret	urn Receipt 102595-01-M-0381

## Department of the Treasury Federal Law Enforcement Agencies

#### PROCESS RECEIPT AND RETURN

PLAINTIFF UNITED STATES OF AMERICA				COURT CASE NUMBER CR No. 03-10353-WGY				
DEFENDAI ROMA	NT N VALDMA	Α			TYPE OF PROCESS  Preliminary Order of Forfeiture			
	Name Of Indiv	vidual,Compa	ny,Corporation,Etc	c. to Serv	e or Description	of Property to Seize		
SERVE Thomas J. Butters, Esquire								
Address (Street or RFD / Apt. # / City, State, and Zip Code) Butters, Brazilian & Small LLP, One Exeter Plaza, Boston, MA 02116								
Send NOTIC	CE OF SERVICE of	opy to Requeste	er:		Number Of Proce Served In This Ca			
JENNIFER H. ZACKS, ASSISTANT U.S. ATTORNEY UNITED STATES ATTORNEY'S OFFICE John Joseph Moakley United States Courthouse					Number Of Partie Served In This Ca			
	se Way, Suite 920 ssachusetts 0221				Check Box If Ser	vice Is On USA		
Numbers, a	and Estimated Avo	ailability times.)			•	usiness and Alternate Ar named individual by		
Signature of	f Attorney or othe	r Originator	[ X ]F	Plaintiff		Telephone No.	Date	
requesting service on behalf of					ndant (617) 748-3100		5	
1						(617) 748-3100	Feb. 14, 2005	
SIGNATURE	E OF PERSON ACC	CEPTING PROC	ESS:			(617) 748-3100	Date Date	
SIGNATURE		,		EASURY	LAW ENFO	(617) 748-3100	Date	
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☐ LEAVE AT PLACE OF SERVICE

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	U.S. Postal Service CERTIFIED MAIL RECEIPT (Domestic Mail Only; No Insurance Coverage Provided)							
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ۍ.	PS Form 3800, January 2	2001	Sae Reverse for Instructions					

SENDER: COMPLETE THIS SECTION •	COMPLETE THIS SECTION ON DELIVERY
■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  ■ Print your name and address on the reverse so that we can return the card to you.  ■ Attach this card to the back of the mailpiece, or on the front if space permits.  1. Article Addressed to: *** **Colored 353 wey Thomas J. Butters, Esq. Butters, Brazilian & Small LLP One Exeter Plaza	A. Signature  X
Boston, MA 02116	3. Service Type  Certified Mail
2. Article Number 7001 2510 0003	4300 2611
PS Form 3811, August 2001 Domestic Ret	urn Receipt 102595-01-M-0381



#### PROCESS RECEIPT AND RETURN

PLAINTIFF UNITED S	: TATES OF AME	RICA			URT CASE NUMI No. 03-1035			
DEFENDAI ROMA	NT N VALDMA	4			PE OF PROCESS eliminary O	rder of Forfeitu	ıre	
	Name Of Indiv	/idual,Compai	ny,Corporation,Etc. t	to Serv	e or Description	of Property to Seize		
SERVE	City of Bos	ton Tax Co	ollector					
AT			D / Apt. # / City all Square, Bosto			ode)		
Send NOTto	CE OF SERVICE co	opy to Requeste	er:	1	Number Of Proces Served In This Ca			
UNITED STA	I. ZACKS, ASSIST ATES ATTORNEY' h Moakley United	S OFFICE States Courtho			Number Of Partie Served In This Ca		1	
1 Courthouse Way, Suite 9200 Boston, Massachusetts 02210					Check Box If Serv	vice Is On USA		
Numbers, or Please set	ind Estimated Avo	ailability times.) ed Prelimina			oon the above-n	usiness and Alternate Ac	·	
					LJT x328	1	Is:	į
Signature of requesting s	f Attorney or other service on behalf	r Originator of	[ X ]Płai [ ]Def	intiff fendant		Telephone No.	Date	
SIGNATURE	OF PERSON ACC	CEPTING PROCI	ESS:			(817) 748-3100	Feb. 14, 2005	
li .	SPACE	BELOW FO	R USE OF TREA	SUR	LAW ENFOR	RCEMENT AGENO	L CY	
	e receipt for the ocess indicated.	District of Origin No.	District to Serve	SIGNAT	URE OF AUTHORIZ Y OFFICER:		Date	
I hereby Cer EXECUTED The Address	rtify and Return Th AS SHOWN IN "R s Shown Above or	nat I [ ] PERSC REMARKS", the r at the Address	DNALLY SERVED, [ ] F Process Described on t s Inserted Below.	IAVE LE	GAL EVIDENCE OF ridual, Company, Co	SERVICE, IVI HAVE orporation, Etc., At		
[ ]   HEREE	BY CERTIFY AND S ED ABOVE.	RETURN THAT	I AM UNABLE TO LOC	ATE TH	E INDIVIDUAL, COM	MPANY, CORPORATION	,	
NAME & TI above:	TLE of Individual S	Gerved If not sh	own			age and discretion then sual place of abode.	residing	
ADDRESS:	(Complete only if o	different than		Date of	Service	Time of Service	[ ] AM [ <u>A</u> ] PM	
				Plea	se see Rem	arks		,
				_	re, Title and Treasu	_	ocar 3/	3/10
REMARKS						ard, Forfeitur Border Protect	es Officer	
		r 50						
	-		as instructe . Signed as r		•	ertified mail	namber	
Сору о	f certifie	d mail fo	orms attached	l				
TD F 90-2	2.48 (6/96)						1	j

	U.S. Postal CERTIFIE (Domestic Mail	D MAIL REC	EIPT Coverage Provided)
2574		£51	2000年
006% 6000	Postage  Certified Fee  Return Receipt Fee (Endorsement Required)  Restricted Delivery Fee (Endorsement Required)		Postmark Here
7001 2510	Sent To City of I Street, Aot. No.: City of I Otty, State, ZiP+4 Box PS Form 3800, January 200		0

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>1. Article Addressed to: €? **No. 03 - 103 53 4/6 **Y</li> </ul>	A. Signature  Agent  Agent  Agent  Adgent  Addressee  B. Received by (Printed Name)  C. Date of Delivery  2 2  D. Is delivery address different from item 1?  Yes
City of Boston Tax Collect City Hall, One City Hall S Boston, MA 02210	If YES, enter delivery address below: □ No □  □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □
_	3. Service Type  Certified Mail
	4. Restricted Delivery? (Extra Fee)
2. Article Number — (Transfer from service labe 7001 2510 000	3 4300 2574
PS Form 3811, August 2001 Domestic Reti	urn Receipt 102595-01-M-0381

## **Department of the Treasury**Federal Law Enforcement Agencies

### PROCESS RECEIPT AND RETURN

PLAINTIFF UNITED STATES OF AMERICA  COURT CASE NUMBER CR No. 03-10353-WGY						
ROMA	N VALDMA		PE OF PROCESS eliminary Or	der of Forfeitu	ıre	
ornur	Name Of Individual, Company, Corporation, Etc. Suffolk County Registry of Deeds	to Serve	e or Description o	of Property to Seize		
SERVE AT	170					
	24 New Chardon Street, P.O. Box 96	60, B	oston, MA 02	114-9660		
	E OF SERVICE copy to Requester:	, *** **	Number Of Proces Served In This Ca			
UNITED STA John Joseph	. ZACKS, ASSISTANT U.S. ATTORNEY ATES ATTORNEY'S OFFICE I Moakley United States Courthouse		Number Of Parties Served In This Cas			
	e Way, Suite 9200 sachusetts 02210		Check Box If Serv	ice Is On USA		
	TRUCTIONS or OTHER INFORMATION TO ASSIST IN EXPERT	DITING: SE	ERVICE (includes Bu	siness and Alternate Ad	dresses, Phone	
pertains to	ord the attached Preliminary Order of Forf to the real property located at 2 Larose Place see Book <u>26783</u> , Page <u>22</u> of the Suffolk Co	e, Apt.	25, Brighton, N	Massachusetts. For s.		
Signature of	Attorney or other Originator [ X ]Pla	aintiff		Telephone No.	Date	
requesting s	ervice on behalf of [ ]De	efendant		(617) 748-3100	Feb. 14, 2005	
SIGNATURE	OF PERSON ACCEPTING PROCESS:	Ç. M	/# ·		Date	
	SPACE BELOW FOR USE OF TREA	ASURY	LAW ENFOR	CEMENT AGENC	Y	
	preceipt for the District of District to Serve Origin No No		URE OF AUTHORIZ Y OFFICER:	ED TREASURY	Date	
I hereby Cer EXECUTED The Address	tify and Return That I [ ] PERSONALLY SERVED, [ ] AS SHOWN IN "REMARKS", the Process Described on a Shown Above or at the Address Inserted Below.	HAVE LE the Indiv	GAL EVIDENCE OF idual, Company, Co	SERVICE, [X] HAVE rporation, Etc., At		
[ ] I HEREB ETC. NAME	Y CERTIFY AND RETURN THAT I AM UNABLE TO LOC D ABOVE.	CATE TH	E INDIVIDUAL, CON	MPANY, CORPORATION,	,	
NAME & TITLE of Individual Served If not shown above:  [ ] A Person of suitable age and discretion then residing in the defendant's usual place of abode.						
ADDRESS: (Complete only if different than shown above.)  Date of Service Time of Service [ ] AM  Please see Remarks.						ĵ
			re, Title and Treasur	y Agency		31/05
REMARKS	:	U.S.	Customs and	Border Prote	ction	
1	inary Order served as instructo 510 0003 4300 2550. Signed as				number	
	of certified mail forms attached			24, 2003.		
	2.48 (6/96)	eu.	W.**			

☐ LEAVE AT PLACE OF SERVICE

	U.S. Postal S CERTIFIED (Domestic Mail O	MAIL RE		ovided)
20				
2.5			· .	
0	Postage	\$		
00Eh	Cartified Fee		Post	mark "
	Return Receipt Fee (Endorsement Required)		He	ere -
E000	Restricted Delivery Fee (Endorsement Required)			•
	Total Postage & Fees	\$		
2510	Suffolk Co	ounty Red	gistry of	Deeds
	or 20 Box 1.2		rdon Stre	et
7001	City, State, ZIP+4	0Box94 ston. MA	02114-96	560
•	PS Form 3800; January 20			se for Instructions
			2	

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  ■ Print your name and address on the reverse so that we can return the card to you.  ■ Attach this card to the back of the mailpiece, or on the front if space permits.  1. Article Addressed to CTN C3 -10353 WEY Suffolk County Registry of Deeds 24 New Chardon Street	A. Signature  X
P.O. Box 9660 Boston, MA 02114-9660	3: Service Type   Express Mail   Express Mail   Registered   Return Receipt for Merchandise   Insured Mail   C.O.D.
	4. Restricted Delivery? (Extra Fee)
(Transfer from service label,	103 4300 2550
PS Form 3811, August 2001 Domestic Re	eturn Receipt

☐ FILE COPY

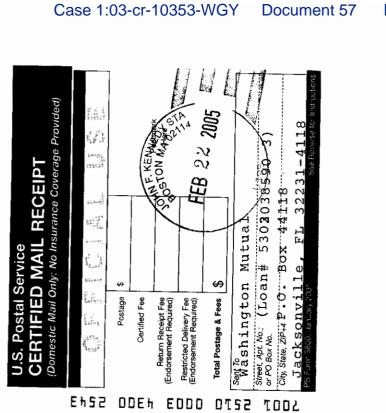


## Department of the Treasury Federal Law Enforcement Agencies

#### PROCESS RECEIPT AND RETURN

PLAINTIFF UNITED S	TATES OF AME	RICA			URT CASE NUMI R No. 03-1035			
DEFENDA ROMA	NT <b>N VALDM</b>	Α			PE OF PROCESS eliminary O	rder of Forfeit	ure	
	Name Of Indi	vidual,Compa	ny,Corporation,Etc	. to Serv	e or Description o	of Property to Seize		1
SERVE	Washingto	n Mutual (l	oan #530203	8590 3	)			
AT	1		D / Apt. # / Cit ksonville, FL 32			ode)		
	CE OF SERVICE c				Number Of Proces Served In This Ca			
UNITED ST. John Joseph	H. ZACKS, ASSIST ATES ATTORNEY h Moakley United	'S OFFICE States Courtho		• •	Number Of Partie Served In This Ca			
1 Courthouse Way, Suite 9200 Boston, Massachusetts 02210					Check Box If Serv	vice Is On USA		1
Numbers, o	and Estimated Avo	oilability times.) ed Prelimina			·	usiness and Alternate Ac		
return ret	corpt requestee				LJT x328	3		
Signature of requesting	f Attorney or othe service on behalf	r Originator of		laintiff		Telephone No.	Date	]
<u> </u> ^	. (	H/ L	<u> </u>	efendant		(617) 748-3100	Feb. 14, 2005	
SIGNATURE	E OF PERSON AC	CEPTING PROC	ESS:				Date	1
	SPACE	BELOW FO	R USE OF TRE	ASUR	LAW ENFOR	RCEMENT AGENO	CY	1
Lacknowledg Total # of Pr	e receipt for the ocess indicated.	District of Origin No.	District to Serve	SIGNAT AGENC	URE OF AUTHORIZ Y OFFICER:	ED TREASURY	Date	]
I hereby Cer EXECUTED The Addres	rtify and Return TI AS SHOWN IN "F is Shown Above o	hat I [ ] PERSO REMARKS", the r at the Address	NALLY SERVED, [ Process Described or Inserted Below.	HAVE LE	GAL EVIDENCE OF idual, Company, Co	SERVICE, IXI HAVE proporation Etd., At		
[ ] I HEREE ETC. NAME	BY CERTIFY AND ED ABOVE.	RETURN THAT	I AM UNABLE TO LO	CATE TH	E INDIVIDUAL, COM	MPANY, CORPORATION	Ι,	1
NAME & TI above:	TLE of Individual S	Served If not sh	own			age and discretion then sual place of abode.	residing	]
ADDRESS: shown abov	(Complete only if ve.)	different than		Pleas	Service se see Rema	rks.	[ JAM [ MPM	0
				1 *	re, Title and Treasu	ry Agency Agency ard, Forfeitu:	ll leocar res Officer	3/3/0
REMARKS						d Border Prote		
7001 25	10 0003 43	300 2543.	s instructed Signed as rms attached	recei		tified mail nu 28, 2005.	umber	
TD F 90-2	2.48 (6/96)			•				_

☐ RETURN TO COURT ☐ FOR CASE FILE ☐ LEAVE AT PLACE OF SERVICE



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.	A. Signature
So that we can return the card to you.  Attach this card to the back of the mailpiece,	B. Received
1. Article Addressed to:	D. Is delivery address different from item 1? Yes
Washington Mutual	If YES, emer delivery address below:
P.O. Box 44118	
Jacksonville, Florida	
32231-4118	3. Service Type
	Y☐ Certified Mail ☐ Express Mail
,	
	☐ Insured Mail ☐ C.O.D.
	4. Restricted Delivery? (Extra Fee)
Transfer from service. 7001 2510 0003 4300 2543	E + 52 00 E + 52 00 E +

102595-01-M-0381

Domestic Return Receipt

PS Form 3811, August 2001



## Department of the Treasury Federal Law Enforcement Agencies

#### PROCESS RECEIPT AND RETURN

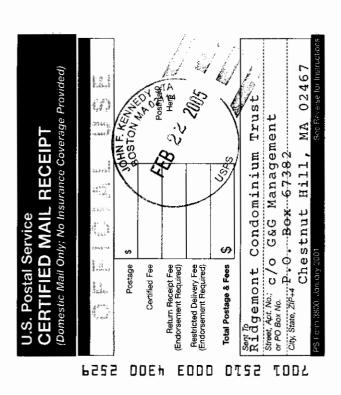
				COURT CASE NUMBER CR No. 03-10353-WGY				
DEFENDANT ROMAN VALDMA					TYPE OF PROCESS Preliminary Order of Forfeiture			
		•	•		-	of Property to Seize		
SERVE Ridgemont Condominium Trust, c/o G&					lanagement			
AT			O / Apt. # / Cit stnut Hill, MA (	-		de)		
Send NOTIC	E OF SERVICE co	ppγ to Requeste	r:	Number Of Proces Served In This Car				
UNITED STA	. ZACKS, ASSIST ATES ATTORNEY' Moakley United S	S OFFICE States Courthou			Number Of Parties Served In This Ca	s To Be		
	se Way, Suite 920 ssachusetts 0221				Check Box If Serv	ice Is On USA		
SPECIAL INSTRUCTIONS or OTHER INFORMATION TO ASSIST IN EXPEDITING SERVICE (includes Business and Alternate Addresses, Phone Numbers, and Estimated Availability times.)  Please serve the attached Preliminary Order of Forfeiture upon the above-named institution by certified mail, return receipt requested.  LJT x3283								
Signature of	Attorney or other	Originator	[ X ]PI	aintiff		Telephone No.	Date	
requesting service on behalf of [ ]Defendant (617) 748-3100 Feb. 14, 2005								
SIGNATURE	OF PERSON ACC	EPTING PROCE	SS:				Date	
	SPACE	BELOW FO	R USE OF TRE	ASUR'	LAW ENFOR	CEMENT AGENO	CY_	
	a receipt for the ocess Indicated.	District of Origin No.	District to Serve	SIGNAT AGENC	URE OF AUTHORIZ Y OFFICER:	ED TREASURY	Date	
I hereby Cer EXECUTED The Address	rtify and Return Th AS SHOWN IN "R s Shown Above or	nat I [ ] PERSO EMARKS", the at the Address	NALLY SERVED, [ ] Process Described on Inserted Below.	HAVE LE	GAL EVIDENCE OF vidual, Company, Co	SERVICE, I HAVE proporation Etc., At		
[ ] I HEREE ETC. NAME	BY CERTIFY AND F D ABOVE.	RETURN THAT	AM UNABLE TO LO	CATE TH	E INDIVIDUAL, CON	MPANY, CORPORATION	,	
NAME & TI above:	TLE of Individual S	erved If not sho	own		A Person of suitable in the defendant's u	age and discretion then sual place of abode.	residing	
ADDRESS: shown abov	(Complete only if o	different than		Date of	Service	Time of Service	[ ] AM [ ] PM	
Please see Reamrks								
Signature, Title and Treasury Agency Stophon B. Loopand Forfoithman Officer						1/05		
REMARKS						d Border Prote	1	
	inary Orde 510 0003 4				above, via e eived on FE	certified mai: B 23, 2005.	l number	
Сору о	f certifie	ed mail fo	orms attache	ed.				
TD F 90-2	2.48 (6/96)							

☐ LEAVE AT PLACE OF SERVICE

102595-01-M-0381

Domestic Return Receipt

PS Form 3811, August 2001 (Transfer from serv....



COMPLETE THIS SECTION ON DELIVERY	A. Signature A. Signature Agent  X	A. Gofth  D. Is delivery address different from item  If YES enter delivery address believed to the control of			3. Service Type  XD Certified Mail	☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D.	4. Restricted Delivery? (Extra Fee)	10 mg
SENDER: COMPLETE THIS SECTION	<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mallriance.</li> </ul>	or on the front if space permits.  1. Article Addressed to CR 16 03 - 10353 WEY	Ridgemont Condominium Trust c/o G&G Management	P.O. Box 67382 Chestnut Harill Mr 02467	(A) (C) (C) (C) (C) (C) (C) (C) (C) (C) (C	3	399	2. Article Number 7001. Card Card Card Card Card Card Card Card

☐ FILE COPY



# Department of the Treasury Federal Law Enforcement Agencies

#### PROCESS RECEIPT AND RETURN

	PLAINTIFF UNITED STATES OF AMERICA			COURT CASE NUMBER CR No. 03-10353-WGY				
ROMAN VALDMA  TYPE OF PROCESS  Preliminary Order of Forfeiture					ure			
SERVE AT	Name Of Individual, Com One 2003 Silver Ac 59PV19, and Vehic to Roman Valdma	cura Model MDX, le Identification N	bearing Massachu lumber 2HNYD188	setts Registration				
Send NOTIC	CE OF SERVICE copy to Requ		Number Of Pro					
UNITED ST	I. ZACKS, ASSISTANT U.S. A ATES ATTORNEY'S OFFICE In Moakley United States Cour		Served In This  Number Of Par Served In This	ties To Be				
1 Courthous	se Way, Suite 9200 ssachusetts 02210			ervice Is On USA				
	STRUCTIONS or OTHER INFORM and Estimated Availability time		DITING SERVICE (includes	Business and Alternate Ac	ddresses, Phone			
Please se	ize and maintain custod	y and control over th		vehicle in accordance	e with the			
attached	Preliminary Order of Fo	orfeiture and applica	ible law.	LJT x3283				
Signature o	of Attorney or other Originator service on behalf of	[ X ]PI		Telephone No.	Date			
	· 1 40	I IDe	efendant	(617) 748-3100	Feb. 14, 2005			
SIGNATURI	E OF PERSON ACCEPTING PR				Date			
				ORCEMENT AGENO	T			
I acknowledg Total # of Pr	pe receipt for the rocess Indicated.  District of Origin No.	District to Serve	SIGNATURE OF AUTHO AGENCY OFFICER:	RIZED TREASURY	Date			
I hereby Ce EXECUTED The Addres	rtify and Return That I [ ] PE AS SHOWN IN "REMARKS", is Shown Above or at the Add	RSONALLY SERVED, [ ] the Process Described on ress Inserted Below.	HAVE LEGAL EVIDENCE the Individual, Company,	OF SERVICE, IN I HAVE Corporation Etd., At				
[ ] I HEREI ETC. NAME	BY CERTIFY AND RETURN THED ABOVE.	IAT I AM UNABLE TO LO	CATE THE INDIVIDUAL, O	COMPANY, CORPORATION	1,			
NAME & TI above:	TLE of Individual Served If not	shown		ble age and discretion then s usual place of abode.	residing			
ADDRESS: (Complete only if different than shown above.)  Date of Service Time of Service [ ] AM [ ] PM								
			Please see Ren	marks	1/ /			
			Signature, Title and Trea	/ Jest	res Officer			
REMARKS	S:	τ		nd Border Prote				
	ove referenced ve				I			
storage	e contractor for	ICE/CBP. Copy	of SEACATS tra	acking printout	attached.			
1								

☐ RETURN TO COURT ☐ FOR CASE FILE ☐ LEAVE AT PLACE OF SERVICE

12:46 Case 1:03 to Red O.35 St VANDY CASD OR LAMBERT STYSTEFF II ed 05/10/2005/1968 Rage 20 of 23 TID= A8DA · SEIZED ITEM VEHICLE FP&F CASE NUMBER: (2004040100002401 LINE: 001 SUBLINE: 0000 PARENT: 0000 OWNING BUREAU: ICE DESC: \* (ACURA SUV) -OWNING PORT: 0401 SEIZE: 1.00 EA PKG: 0 SAMPLE: N

INV: 00 PKG: 1 EA SHELF: ...

VIN NBR: 2HNYD18863H506272 NBR OF CYL:

MAKE: ACUR MODEL: MDX YEAR:\* 2003 STYLE:

COLOR:\* GRY ODOMETER: ODOM UM: FUEL TYPE:

LICENSE PLATE#: PLATE VR. CATEGORY CODE: VEH PROPERTY TYPE: \* SU LICENSE PLATE#: PLATE YR: STATE REG: CNTRY REG: EPA COMPLIANCE (Y/N)?: DOT COMPLIANCE (Y/N)?: DMV NOTIFIED: LEGAL STATUS: \* SZ PHYSICAL STATUS: \* HD CUSTODIAN: CTR PROHIBITED/RESTRICTED ITEM: N SEIZURE DATE: \* 11202003 FORFEITURE DATE: \* SPLIT(PMSP): SAMPLE(PMSA): DATES - ENTERED (PMAL): INCIDENT NUMBER: 2004SZ001155001

(PF1/2=HELP/FLD HLP) (PF3/PF4=MAIN/PRV MENU) (PF8=NXT PG) (PF12=DTL)

12:46	Case SeDZeGrabQ353aNVGXSE PLOCUMENTS TEM	Filed 05/10/2005 M91 Rage 21 of 23
TID=A8DA	STORAGE LOCATION QUERY	T2P9I001

		****		PAGE:
FP&F CASE NBR	:(2004040100002	401 LINE NBR: 001	SUB LINE NBR:	0000
INPUT DATE	CUSTODIAN	STORAGE LOCATION	ACCEPT DATE	STATUS
20031126	SAC-SPC	TRAN	20031120	Н
20031201	SPC-	9999	20031201	H
20031201	CTR-		20031201	H
20031201	CTR-		20031201	H
20031201	CTR-	WHN	20031201	H
20040109	CTR-	WHN	20031201	H
20040528	CTR-	WHN	20031201	Α

(F1/F2=HELP) (F3=MAIN) (F4=PREV MENU) (F7=PREV PAGE) (F8=NEXT PAGE)



#### PROCESS RECEIPT AND RETURN

PLAINTIFF UNITED STATES OF AMERICA			COURT CASE NUMBER CR No. 03-10353-WGY			
DEFENDANT ROMAN VALDMA		TYPE OF PROCESS  Preliminary Order of Forfeiture				
SERVE AT	AT 2001, and recorded in Suffolk County Registry of Deeds, Book 26783, Page 22				August 1,	
	Address (Street or RFD / Apt. # / City, State,	and Zip Code;				
	E OF SERVICE copy to Requester: . ZACKS, ASSISTANT U.S. ATTORNEY		Number Of Process To Be Served In This Case.			
UNITED STA John Joseph	TES ATTORNEY'S OFFICE  Moakley United States Courthouse	I	Number Of Parties To Be Served In This Case.			
	e Way, Suite 9200 sachusetts 02210	Chec	Check Box If Service Is On USA			
	TRUCTIONS or OTHER INFORMATION TO ASSIST IN EXPE	DITING SERVICE	(includes Bu	usiness and Alternate Ad	dresses, Phone	
Please serve notice upon the real property referenced above of this forfeiture action by posting and walking the attached Preliminary Order of Forfeiture, in accordance with applicable law.						
Signature of	Attorney or other Originator [ X ]PI	aintiff		Telephone No.	Date	
	Signature of Attorney or other Originator requesting service on behalf of IDefendant Telephone No. Date  [X   Plaintiff IDefendant (617) 748-3100   Feb. 14, 2005]				Feb. 14, 2005	
SIGNATURE	OF PERSON ACCEPTING PROCESS:				Date	
SPACE BELOW FOR USE OF TREASURY LAW ENFORCEMENT AGENCY						
i acknowledge receipt for the Total # of Process Indicated.  One CODY of order No. Mass.  District to Serve SIGNATURE OF AUTHORIZED TREASURY AGENCY OFFICER:  No. Massachus etts			Date			
I hereby Certify and Return That I [ ] PERSONALLY SERVED, [ ] HAVE LEGAL EVIDENCE OF SERVICE, [ ] HAVE EXECUTED AS SHOWN IN "REMARKS", the Process Described on the Individual, Company, Corporation, Etc., At The Address Shown Above or at the Address Inserted Below.						
[ ] I HEREBY CERTIFY AND RETURN THAT I AM UNABLE TO LOCATE THE INDIVIDUAL, COMPANY, CORPORATION, ETC. NAMED ABOVE.						
NAME & TIT above:	LE of Individual Served If not shown	[ ] A Person of suitable age and discretion then residing in the defendant's usual place of abode.				
ADDRESS: (Complete only if different than shown above.)		Date of Servi	ce .   05	Time of Service [ ] AM  2:50 [ TPM  Approx.		
		Signature, Title and Treasury Agency  Signature, Title and Treasury Agency				
REMARKS:						
Posted on door (front) of apt. 25, 2 La Rose, Brighton, ma.						
TD F 90-22.48 (6/96)						

#### PROCESS RECEIPT AND RETURN

PLAINTIFF UNITED STATES OF AMERICA				COURT CASE NUMBER CR No. 03-10353-WGY			
DEFENDANT ROMAN VALDMA			TYPE OF PROCESS  Preliminary Order of Forfeiture				
SERVE	Name Of Individual, Company, Corporation, Etc. to Serve or Description of Property to Seize \$80,000 in United States Currency						
AT	Address (Street or RFD / Apt. # / City, State, and Zip Code)						
Send NOTICE OF SERVICE copy to Requester:			a se jak ja	Number Of Proces Served In This Ca			
JENNIFER H. ZACKS, ASSISTANT U.S. ATTORNEY UNITED STATES ATTORNEY'S OFFICE John Joseph Moakley United States Courthouse			Number Of Parties Served In This Ca				
	se Way, Suite 920 ssachusetts 0221				Check Box If Serv		
	TRUCTIONS or OTH nd Estimated Avo		ON TO ASSIST IN EXP	EDITING SI	ERVICE (includes Bu	osiness and Alternate Ad	ddresses, Phone
attached I	Preliminary Or	rder of Forfe		able law		rrency in accordan	
		<u> </u>				LJT x3283	
Signature of Attorney or other Originator [ X ]Ple requesting service on behalf of [ ]De			Plaintiff Defendant		Telephone No.	Date	
			(617) 748-3100			Feb. 14, 2005	
SIGNATURE	OF PERSON ACC						Date
	SPACE	BELOW FO	R USE OF TRE	ASUR	LAW ENFOR	CEMENT AGENO	CY
	e receipt for the ocess Indicated.	District of Origin No.	District to Serve	SIGNAT AGENC	SIGNATURE OF AUTHORIZED TREASURY AGENCY OFFICER:		
I hereby Cer EXECUTED The Address	tify and Return Th AS SHOWN IN "R S Shown Above or	nat I [ ] PERSO EMARKS", the at the Address	NALLY SERVED, [ ] Process Described or Inserted Below.	] HAVE LE n the Indiv	GAL EVIDENCE OF idual, Company, Co	SERVICE, [ ] HAVE proporation, Etc., At	
I I HEREB ETC. NAME	Y CERTIFY AND I	RETURN THAT	I AM UNABLE TO LO	CATE TH	E INDIVIDUAL, COM	MPANY, CORPORATION	,
NAME & TITLE of Individual Served If not shown above:			[ ] A Person of suitable age and discretion then residing in the defendant's usual place of abode.				
ADDRESS: (Complete only if different than shown above.)			Date of	Service	Time of Service	[ ] AM [ ] PM	
				Pleas	e e Rema	fks	
				Signate Steph	en P. Leona	y Agency ard, Forfeitur	3/3//cres Officer
REMARKS	:		t	J.S. C	ustoms and	Border Protec	ction
This currency is NOT in custody. Not able to maintain custody. Not seized.				ody.			
					H		*
D F 90-23	2 48 (6/96)				-		